

**American Institute of Constructors
Constructor Certification Commission
Associate Constructor CPD Reporting Form**

Instructions - To maintain your AC certification you must complete this form. This form requires the signature of your current work supervisor. If you have switched jobs during the two-year reporting cycle please complete a separate form from your previous employer. The completed form may be emailed to info@professionalconstructor.org or faxed to 571-527-3105.

Name _____ Certification Number: _____

Address: _____ City: _____

State: _____ Postal: _____ Phone: _____

Email: _____

Current Employer _____

City of Employer: _____ State of Employer: _____

Employment Start Date: _____ Employment End Date: _____

Supervisor Name: _____ Title: _____

1. Briefly describe your major job duties with this company over the past two years or since being employed (if less than two years). If more space is needed please attach additional sheets of paper.

2. Have you attended any company or outside continuing education courses? Please provide a brief overview of what type of education you have received.

Do you plan to sit for the CPC Exam in the future? ____ Yes ____ No

I swear and affirm that this report accurate. I agree to abide the AIC Constructor Code of Conduct and pay any fees required for keeping my AC Certification in good standing.

Candidate Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____